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On OCTOBER 14, 2005

MORGAN, LEWIS and BOCKIUS LLP

By: RUMA SINGH

PATENT
Attorney Docket No.: 61030-0044-US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

G. Shankar, et al.

Application No.: 10/760,063

Filed: January 16, 2004

For: Methods of Treating Conditions
Associated with an EDG-2 Receptor

Customer No.: 43850

Confirmation No.: 1959

Examiner: Kwon, Brian Yong S.

Technology Center/Art Unit: 1614

ASSOCIATE POWER OF ATTORNEY/
CHANGE OF CORRESPONDENCE
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Sir:

As an attorney of record, I hereby appoint:

Alok Goel, Reg. No. 51,745

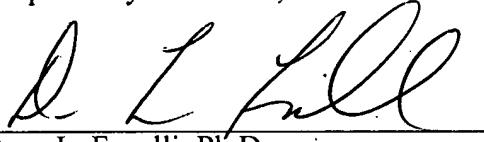
with associate power of attorney to prosecute this application, including all continuations, divisionals, thereof, and transact all business in the United States Patent Office connected therewith.

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Respectfully submitted,



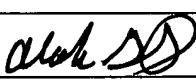
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	10/760,064
		Filing Date	January 16, 2004
		First Named Inventor	Geetha Shankar
		Art Unit	1614
		Examiner Name	Kwon, Brian Yong S.
Total Number of Pages in This Submission		Attorney Docket Number	061030-0044-US

ENCLOSURES (Check all that apply)			
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) <small>(please identify below):</small> <ul style="list-style-type: none"> Associate Power of Attorney/Change of Correspondence Address and Customer Number Return postcard 	
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual	Morgan, Lewis & Bockius LLP Alok Goel	Reg. No. 51,745
Signature		
Date	October 14, 2005	

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